## Fiscal Estimate - 2015 Session

☑ Original ☐ Updated	Corrected	Supplemental			
LRB Number 15-0595/1 Introduction Number SB-039					
Description Newborn screening for certain lysosomal storage disorders					
Fiscal Effect					
Appropriations Reve		Annieste de la constante de la			
Local:  No Local Government Costs  Indeterminate  1. Increase Costs Permissive Mandatory  2. Decrease Costs Permissive Mandatory  School Districts Districts					
Fund Sources Affected  Affected Ch. 20 Appropriations  GPR FED PRO PRS SEGS 20.435(1)(ja)					
Agency/Prepared By	Authorized Signature	Date			
DHS/ Sara Koliner (608) 267-5147	Andy Forsaith (608) 266-7684	3/20/2015			

## Fiscal Estimate Narratives DHS 3/20/2015

LRB Number 15-059	1 Introduction Number	SB-039	Estimate Type	Original	
Description					
Newborn screening for certain lysosomal storage disorders					

## Assumptions Used in Arriving at Fiscal Estimate

Under current law, the attending physician or nurse-midwife must ensure that every newborn undergoes testing for certain congenital and metabolic disorders prior to the infant's discharge from the hospital or maternity home, or within a week from birth for infants born elsewhere. DHS Administrative Code specifies the congenital and metabolic disorders for which newborn infants are screened, with the current Newborn Screening Program screening for 46 conditions including hearing loss.

The proposed bill specifies that, in addition to the screenings required under DHS rules, newborns be tested for six lysosomal storage disorders.

In order to screen for the conditions specified in SB 39, Wisconsin State Laboratory of Hygiene (WSLH) estimates an additional \$21 of expenses per screening card received. With an estimated 66,000 births in FY 15, the cost would amount to an annual total of \$1,392,315. Equipment, supplies, and 1.5 FTE for primary testing would account for \$678,600 of the total, while supplies and 1.4 FTE for the evaluation of primary positives and follow-up would account for the remaining \$713,715.

Blood samples are collected and tested by WSLH through the use of newborn screening cards that are purchased at a fee set by the Department (currently \$109). This fee covers the WSLH costs for conducting testing and the administrative and special dietary treatment costs of the Department to administer the Newborn screening program.

Should the Newborn Screening Program include the lysosomal storage disorder tests required under this bill, the Department expects to exhaust existing fee revenue by the following year after enactment, necessitating an increase in the newborn screening card fee. Although this will not result in increased costs to DHS under current practices, the Department is statutorily responsible for the expenses incurred by WSLH under the program and for managing the revenue by setting fees in administrative rule.

In summary, it is estimated that the bill will increase costs to WSLH by \$1,392,300 PR per year, resulting in a revenue shortfall of an equal amount in DHS and requiring an estimated increase in the newborn screening card fee from \$109 to \$130.

**Long-Range Fiscal Implications**